



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 7743

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|-------------------------------------|
| SERIAL NUMBER 10/681,924 | FILING DATE 10/09/2003 RULE | CLASS 548 | GROUP ART UNIT 1626 | ATTORNEY DOCKET NO. QA0279 NP |
|-----------------------------|---------------------------------------|--------------|------------------------|-------------------------------------|

APPLICANTS

T.G. Murali Dhar, Newtown, PA;

Dominique Potin, Epone, FRANCE;
 Magali Jeannine Blandine Maillet, Suresnes, FRANCE; Michele Launay, Rueil Malmaison, FRANCE;
 Eric Antoine Nicolai, Rueil Malmaison, FRANCE;
 Edwin J. Iwanowicz, San Diego, CA;

** CONTINUING DATA ***** *AJP*
 This appln claims benefit of 60/417,935 10/11/2002

** FOREIGN APPLICATIONS ***** *AJP*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 01/17/2004

| | | | | | |
|---|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance | STATE OR COUNTRY PA | SHEETS DRAWING 0 | TOTAL CLAIMS 20 | INDEPENDENT CLAIMS 2 |
|---|---|---------------------------|------------------------|-----------------------|----------------------------|

Verified and Acknowledged
 Examiner's Signature: *Anthony J. Blum* Initials: *AJP*

ADDRESS
 23914
 STEPHEN B. DAVIS
 BRISTOL-MYERS SQUIBB COMPANY
 PATENT DEPARTMENT
 P O BOX 4000
 PRINCETON, NJ
 08543-4000

TITLE
 Hexahydro-benzimidazolone compounds useful as anti-inflammatory agents

| | | |
|-----------------------------------|---|---|
| FILING FEE RECEIVED 900 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|-----------------------------------|---|---|